STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS AND MINING							FORM 3 AMENDED REPORT		
APPLICATION FOR PERMIT TO DRILL						1. WELL NAME and NUMBER NBU 921-35F4CS			
2. TYPE OF WORK DRILL NEW WELL REENTER P&A WELL DEEPEN WELL DEEPEN WELL					3. FIELD OR WILDCAT NATURAL BUTTES				
4. TYPE OF WELL Gas Well Coalbed Methane Well: NO						5. UNIT or COMMUNITIZATION AGREEMENT NAME NATURAL BUTTES			
6. NAME OF OPERATOR KERR-MCGEE OIL & GAS ONSHORE, L.P.						7. OPERATOR PHONE 720 929-6007			
8. ADDRESS OF OPERATOR P.O. Box 173779, Denver, CO, 80217						9. OPERATOR E-MAIL Kathy.SchneebeckDulnoan@anadarko.com			
10. MINERAL LEASE NUMBER (FEDERAL INDIAN OR STATE)				12. SURFACE OWNERSHIP					
UO 01194 ST 13. NAME OF SURFACE OWNER (if box 12	FEDERAL INDIAN STATE FEE				FEDERAL INDIAN STATE FEE 14. SURFACE OWNER PHONE (if box 12 = 'fee')				
15. ADDRESS OF SURFACE OWNER (if box 12 = 'fee')						16. SURFACE OWNER E-MAIL (if box 12 = 'fee')			
17. INDIAN ALLOTTEE OR TRIBE NAME (if box 12 = 'INDIAN')		18. INTEND TO COMMINGLE PRODUCTION FROM MULTIPLE FORMATIONS YES (Submit Commingling Application) NO (VERTICAL DIRECTIONAL HORIZONTAL			
20. LOCATION OF WELL	FC	DOTAGES	QTR-QTR	9	SECTION	TOWNSHIP	RANGE	MERIDIAN	
LOCATION AT SURFACE 2483 FR		NL 2358 FWL	SENW		35	9.0 S	21.0 E	S	
Top of Uppermost Producing Zone 2567 FR		NL 2159 FWL	SENW	SENW		9.0 S	21.0 E	S	
At Total Depth 2567 FN		NL 2159 FWL	SENW	W 35		9.0 S	21.0 E	S	
21. COUNTY UINTAH 22. DISTANCE TO NEARES 2			EAREST LEASE LIN 2159						
25. DISTANCE TO NEARES (Applied For Drilling or Co				AME	POOL	26. PROPOSED DEPTH MD: 9761 TVD: 9752			
27. ELEVATION - GROUND LEVEL		28. BOND NUMBER				29. SOURCE OF DRILLING WATER / WATER RIGHTS APPROVAL NUMBER IF APPLICABLE			
5122		22013542				Permit #43-8496			
		Αī	TTACHMENTS						
VERIFY THE FOLLOWING	ARE ATTACH	HED IN ACCORDAN	CE WITH THE U	ТАН (OIL AND (GAS CONSERVAT	ION GENERAL R	ULES	
WELL PLAT OR MAP PREPARED BY LICENSED SURVEYOR OR ENGINEER				COMPLETE DRILLING PLAN					
AFFIDAVIT OF STATUS OF SURFACE OWNER AGREEMENT (IF FEE SURFACE)				FORM 5. IF OPERATOR IS OTHER THAN THE LEASE OWNER					
DIRECTIONAL SURVEY PLAN (IF DIRECTIONALLY OR HORIZONTALLY DRILLED)				TOPOGRAPHICAL MAP					
NAME Danielle Piernot	TLE Regulatory Analyst PHON			PHONE 72	720 929-6156				
SIGNATURE DATE 11/23/2010				EMAIL gnbregulatory@anadarko.com					
API NUMBER ASSIGNED APPROVAL 43047513570000				Bacquill					
		Permit Manager							

